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		JAN. U.		. ,			(Signature)	
		1		,			(Date)	
APPLICATION NO.	FILING DATE	PRADE	FIRST NAMED INVENTO	OR .	ATTOR	NEY DOCKET NO.	CONFIRMATION NO.	
10/625,955	10/625,955 07/24/2003		David O. Lewis		ROC	C920030175US1	1644	
TITLE OF INVENTION	: METHOD TO DISAB	LE ON/OFF CAPACITY	ON DEMAND					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FER	TOTAL FEE(S) DUE	DATE DUE	
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HENEGHAN,	MATTHEW E	2439	713-170000		C:1504	300.00 DA		
1. Change of correspond CFR 1.363).	ence address or indicatio	n of "Fee Address" (37		e patent front page, li		1Patters	on & Sheridan, L	
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Please check the appropri	riate assignee category or	categories (will not be pr	rinted on the patent):	☐ Individual ४ €	orporatio	on or other private grou	up entity Government	
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	s SMALL ENTITY state		☐ b. Applicant is no l	onger claiming SMA	LL ENT	TTY status. See 37 CF	R 1.27(g)(2).	
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Authorized Signature	7 1-21	the		Date Oc	tober	23, 2008		
Typed or printed nam	Grant A. J	ohnson		Registration 1	No. 4	12,696		
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		•	JAN 0				(Signature)			
	:	•					(Date)			
	APPLICATION NO.	FILING DATE	134	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.			
	10/625,955	07/24/2003		David O. Lewis		ROC920030175US1	1644			
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CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent atto	the names of up to 3 registered patent attorneys gents OR, alternatively, the name of a single firm (having as a member a stered attorney or agent) and the names of up to gistered patent attorneys or agents. If no name is d, no name will be printed. 1 Patterson & Sheridan, LL 2 2 3					
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Ple	ase check the appropri	ate assignee category or	categories (will not be pr	inted on the patent):	Individual & Con	poration or other private gro	oup entity Government			
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		us (from status indicated SMALL ENTITY statu		☐ b. Applicant is no long	ger claiming SMALI	. ENTITY status. See 37 Ci	FR 1 27(a)(2)			
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	Authorized Signature	J JA	fh		Date Octo	ober 23, 2008				
	Typed or printed name	·/_	<u>ohnson</u>		Registration No.					
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